PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

10801 968

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			42			•	. [RATE	FEE	}	RATE	FĘE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	ОЯ	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			4 2minus 20=		• 22/			X\$ 9=		OR	X\$18=	396
INDEPENDENT CLAIMS			# minus 3 =		• /			X43=		OR	X86=	86
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in						olumn 2	• [TOTAL		OR	TOTAL	1232
CLAIMS AS AMENDED - PART II								SMALL	ENTITY	OR	OTHER SMALL	THAN
AMENDMENTA	400	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 36	Minus	79		= \		X\$ 9=		OR	X\$18=	
	Independent	• 3	Minus	9		=		X43=		OR	X86=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						' [+145=		OR	+290=	
								TOTAL ODIT, FEE			TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**			\prod	X\$ 9=	•	OR	X\$18=	
	Independent	•	Minus	***	_	=		X43=		OR	X86≃	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	PENDENT	CLAIM		」	+145=		OR	+290=	
								TOTAL DOT EEE		OR	TOTAL ADDIT. FEE	•
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	٠	HIGHI NUME PREVIO PAID I	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	ŀΓ	X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***				X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											.000	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
•	n the "Highest Nu The "Highest Nurr	mber Previously Pai ther Previously Pail	us For IN THI d For (Total or	S SPACE & Independe	s less that em) is the	n 3, enter "3." highest numbe	r four	nd in the app	ropriate box	in col	fumn 1.	